CORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information)

Location listed as:	Location changed to:
Section-Township-Range: 5-235	5-235-/E
Fraction (1/4 1/4 1/4):	N2 NW
Other changes: Initial statements: Well Owner:	Lowell Mc Kunna
Changed to: Lowelf McK	anna
Comments: Property address is	4/8 Woodside Ct., Newton, KS
67//7	
verification method: Harvey County Apprais	er's online Parcel Search,
verification method: Harvey County Appraise area road map, and mapping	tool & arrial photos on
KGS website.	initials: DRL date: 5/4/2010
submitted by: Kansas Geological Survey Data Resources Library, 193	0 Constant Ave., Lawrence, KS 66047-3726

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WE	LL RE	CORD	Form W	WC-5	Division of Water	Resources App. No	_{).} L		
1 LOCATION			Fraction		Section Number	Township No.	Range Number		
County: //			Sw 4Se 4NW		5	T d d S	R ZE W		
			if unknown, distance &		Global Positioning				
from nearest town or intersection: If at owner's address, check here .				Latitude: (in decimal degrees) Longitude: (in decimal degrees)					
				Elevation: (in decimal degrees)					
2 WATED X	ELL ON	WATED.	11 A1 F		Datum: WGS 84	s, □ NAD 83, □	NAD 27		
2 WATER WELL OWNER: LOWE / Mc Kunn & RR#, Street Address, Box #: 300 5 Cotton Hill Dr			Collection Method: GPS unit (Make/Model:)						
City, State, ZIP Code : Newton, Ks. 6714			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey						
		110772	019/13/0/1/	7	Est. Accuracy: \square <	3 m, 🔲 3-5 m, 🔲	5-15 m, \square >15 m		
3 LOCATE WE WITH AN "Y		A DEPTH OF	COMPLETED WELL	1 42	A.				
SECTION B									
N	N WELL'S STATIC WATER LEVEL								
	Pump test data: Well water wasft. after hours pumping gpm								
	EST. YIELD & gpm. Well water was ft. after hours pumping gpm. Bore Hole Diameter in. to ft., and ft., and ft.								
w X	K E Bore Hole Diameter								
CW	Domestic Deadlet Doil field water supply Dewatering Dether (Specify below)								
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well									
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☐ No									
S If yes, mo/day/yr sample was submitted									
water went distinted to 110									
5 TYPE OF CASING USED: Steel Y PVC Other Other									
CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to ft. Diameter in to ft. Diameter in to ft.									
Casing diameter in to fin to f									
TYPE OF SCR	EEN OR	PERFORATION	MATERIAL:						
☐ Steel		inless Steel	None used (open h	ole)	Other (Specify)				
☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous slot ☑ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)									
Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft.									
SUREEN-PERFURATED INTERVALS: From									
From									
From									
6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
what is the hearest source of possible contamination: Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)									
Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well									
			it	☐ Fertilizer ste Distance f	, , ,	s well			
FROM TO	T wen	LITHOLOG		FROM	,	OG (cont.) or PLU	GGING INTERVALS		
0 20	CI	e y							
		<i>'</i>							
20 22	Son	e Water							
00 00	1	Ly Shale		-					
22 23	Gra	Ly Shave							
R5- R6	Wa	ter							
26 92	BIV	e Shall	0						
# CO. VIII 1 C	OP 10 C	D. F. A. B. D. C.	NO CEDMENTS A MES	Nr. TTI	11 57				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ⊠ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) В									
Kansas Water Well Contractor's License No									
under the busin	ess name	of .13AC.15.1	hus Drilli	na	by (signature)	Tall His	Backlille		
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.									
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									